

## ABSTRACT

### SOCIAL WORK

SPAULDING, MONIQUE

B.A. SPELMAN COLLEGE, 1992

#### A DESCRIPTIVE STUDY OF JOB SKILLS TRAINING TO INCREASE EMPLOYABILITY AND LIFE SATISFACTION IN A HOMELESS MALE

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Thesis dated July, 1998

The purpose of this study was to describe the efficacy of job training skills on a homeless male's employability and life satisfaction. A single system intervention was used with an African American homeless man who was a patient at the Grady Health System. The intervention was to teach the skills necessary for this client to secure employment thereby increasing the quality of living standard. The client agreed to fully participate in six Job Training Modules which lasted over a two week period. At the conclusion of the sessions, the client also agreed to apply for three jobs using the newly acquired skills.

The client's life satisfaction was measured before, during and after the intervention period to determine if his satisfaction with his life circumstances improved with the advent of learning skills necessary to secure employment. Furthermore, the client's knowledge of how to conduct a formal job search was assessed before and after the intervention using a measurement designed to track his knowledge in this area. The client was able to move from homelessness to employment and also showed an increase in his life satisfaction as a result.

**A DESCRIPTIVE STUDY OF JOB SKILLS TRAINING TO  
INCREASE EMPLOYABILITY AND LIFE SATISFACTION  
IN A HOMELESS MALE**

**A THESIS  
SUBMITTED TO THE FACULTY OF CLARK ATLANTA UNIVERSITY  
IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR  
THE DEGREE OF MASTER OF SOCIAL WORK**

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**ATLANTA, GEORGIA**

**JULY 1998**

P-iv R-57

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## CHAPTER ONE

### INTRODUCTION

Homelessness is a pervasive problem that has affected approximately 26 million people in the United States.<sup>1</sup> Whether throughout the territory of a state or whether in an urban area, homeless people find themselves in this state for a variety of reasons which include a dearth of low cost housing, job layoff or relocation, loss of a spouse, substance abuse, mental illness.<sup>2</sup> Additional causes of homelessness include the impact of changes in the national policy regarding the care of the mentally ill and the federal government's attempt to decrease the amount of Social Security payments issued to citizens.<sup>3</sup>

While homelessness is prevalent among all racial and ethnic groups, homelessness affects more African Americans than White Americans.<sup>4</sup> Authors from the University of Pennsylvania conducted a study of the homeless in New York City and in Philadelphia and found that African Americans were 2.3 times more likely to use a homeless shelter than the population as a whole and 17 times more likely to do so than

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<sup>1</sup> Bruce Link, Ezra Susser, Ann Steuve, "Lifetime and 5 Year Prevalence of Homelessness in the U.S." American Journal of Public Health 84. (December 1994): 1907-12

<sup>2</sup> National Association of Social Workers Encyclopedia of Social Work 18<sup>th</sup> Edition. Washington. DC National Association of Social Workers, 1987.

<sup>3</sup> Ibid.

<sup>4</sup> Dennis Culhane, Stephen Mettraux, "The Black Hole: The Effects of Homelessness on Race," The Economist 342. (January 18, 1997): 30-31.

Whites.<sup>5</sup> Additionally, African Americans were 21 times more likely to be homeless than Whites.<sup>6</sup> Furthermore, males tend to be affected by homelessness more frequently than females.<sup>7</sup> Illustrative of males being more frequently affected is that of the intakes performed on 15,281 individuals during 1995 by the Task Force for the Homeless in Atlanta, 7,163 (47%) were single men.<sup>8</sup> Of the remaining individuals, 5,730 (37%) were single women and 2,388 (16%) were couples with children. Overwhelmingly, African American single males represent a large percentage of the homeless population.

Although race and gender have significantly different characteristics among the homeless population, it has been found that an individual's education and vocational training, or lack thereof, may contribute to that individual's homeless state. A study on the theoretical framework and models for examining the social phenomenon of homelessness found that among other variables, the rate of entry into homelessness can be attributed to lesser amounts of education, vocational training and unemployment among the homeless population.<sup>9</sup> As a result of the aforementioned conditions, homeless men, in particular, experience a tremendous amount of despair, depression and general discontentment with their lives and circumstances. Many are eager to improve the conditions of their lives by finding and maintaining stable employment. Since many

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<sup>5</sup> Ibid.

<sup>6</sup> Ibid.

<sup>7</sup> Task Force for the Homeless / Georgia Coalition to End Homelessness, Annual Report (Atlanta, GA. 1996), 10

<sup>8</sup> Ibid.

<sup>9</sup> Irving Piliavin, Bradley R. Entner Wright, Robert D. Mare, Alex H. Westerfelt, "Exits from and Returns to Homelessness," Social Service Review ( March 1996): 33-57



discontentment with their lives and circumstances. Many are eager to improve the conditions of their lives by finding and maintaining stable employment. Since many homeless men have been out of the job market for a considerable amount of time, it is critical that new or additional employment skills are learned so that entry into the job market becomes possible.<sup>10</sup>

In 1996, the Annual Report of the Task Force for the Homeless / Georgia Coalition to End Homelessness estimated that in 1995 there were a total of 197,353<sup>11</sup> homeless people in Georgia. It was estimated that sixty-five percent (155,941) of these individuals lived in urban areas.<sup>12</sup> More specifically, the Task Force for the Homeless estimated the homeless population in the Atlanta area, the largest metropolitan area in Georgia, in 1995 to be 47,753 representing twenty five percent of the state's homeless population.<sup>13</sup>

Piliavin, Wright, Mare, and Westerfelt's examination explored the transitions between homeless and domiciled (having a home to go to) states and found that among all factors leading to homelessness, human capital deficiencies were significant among this population.<sup>14</sup> For purposes of this discussion, human capital deficiencies were

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<sup>10</sup> Ibid.

<sup>11</sup> Task Force for the Homeless / Georgia Coalition to End Homelessness. Annual Report. (Atlanta, GA. 1996), 22

<sup>12</sup> Ibid.

<sup>13</sup> Ibid.

<sup>14</sup> Irving Piliavin, Bradley R. Entner Wright, Robert D. Mare, and Alex H. Westerfelt, "Exits from and Returns to Homelessness", 35

classified on indicators such as educational attainment, occupational skill training.<sup>15</sup>

Transience is defined as whether the individual has migrated from their community of origin in search of employment or housing opportunities.<sup>16</sup> A domiciled state is defined as whether or not the person has an address of record to go home to on a daily basis.<sup>17</sup> The hypothesis of these author's study stated that the rate of exiting homeless is lower and the rate of returning to homelessness is greater among individuals who have less education, no vocational training and have spent a greater part of their adult lives unemployed.<sup>18</sup>

### **Statement of the Problem**

Homelessness in the United States has escalated beyond this country's control. African American males are disproportionately represented among the ranks of the homeless leading to depression and despair and dissatisfaction with life in general.<sup>19</sup> One of the many reasons cited as a cause of homelessness is the lack of job skills training available to assist homeless men with securing gainful employment. Many programs which provide assistance to the homeless offer temporary solutions to the homeless persons problems like short term shelter placement for one night. The homeless problem is so pervasive that even authors in the print media agree that more solutions to

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<sup>15</sup> Ibid.

<sup>16</sup> Ibid., 36

<sup>17</sup> Ibid.

<sup>18</sup> Ibid., 37

<sup>19</sup> Ibid.

homelessness could be offered if programs provided real outreach like a place to live and skills necessary for finding and keeping a job.<sup>20</sup>

Without adequate job training skills, homeless men will not be able to find steady, gainful employment. An intervention which focuses on a strategy which prepares this population for employment could also increase life satisfaction within the homeless population.

### **Purpose and Significance of the Study**

The purpose of this study is to determine the efficacy of Job Training Skills on a homeless male's employability and life satisfaction. It provided a case study for problem identification and then an intervention. It examined an intervention strategy utilized with an African American male who was homeless. Assessing intervention with this population to determine outcome is of particular importance to the social work profession and clinical social work in that it may provide additional information and treatment plans in working with the homeless. This study of the intervention with an African American male utilizing job skills training could add to the present knowledge base for social work education and research by providing additional information on the causes and consequences of homelessness and how a job training intervention may be a helpful treatment modality, especially with the homeless African American male.

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<sup>20</sup> Sara Hope- Franks, "Program Offers Work Training and Rehabilitation," The Washington Post (August 15, 1996): 3.

This study is significant to the researcher who came into regular contact with the homeless population as they use the services of the Grady Health System where the researcher was a student intern at the time of the study. Assessing an intervention was important because there were limited agencies who could assist this population with providing the necessary skills for moving into gainful employment and thus moving out of homelessness.

This study could provide new knowledge for the profession in that it could be of value in assessing how teaching job skills impacts employability and life satisfaction. Clinical social work practice depends on adequate information regarding moving this population at risk to full employment and thus decreasing the incidence of homelessness. There is a need for social research into the factors which motivate homeless men to move toward full employment.<sup>21</sup>

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<sup>21</sup> Ibid.

## CHAPTER TWO

### REVIEW OF LITERATURE

The social work profession has given much attention to the plight of the homeless. Volumes of literature have been written about the plight of the homeless but little attention has been given to the concept of moving the homeless male from homelessness through the use of intensive job training and preparation.

Many empirical studies of homeless people date back to at least the 19<sup>th</sup> century.<sup>1</sup> These studies have focused on policy and theoretical issues surrounding homelessness but not around the conditions affecting the entry into homelessness, exit from and sometimes return to homelessness<sup>2</sup>, as was the case with the client in this study.

In his classic work *The Hobo*, Nels Anderson gave scant attention to the possibility that men became "hobos", or "bums" because they lacked employment skills in the post World War I economy of the United States.<sup>3</sup> He instead viewed homelessness as largely due to physical disabilities, personality defects, drug addictions, debilitating personal crises and wanderlust.

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<sup>1</sup> Irving Piliavin, Bradley R. Entner, Robert D. Mare, Alex H. Westerfelt, "Exits from and Returns to Homelessness", 35-37

<sup>2</sup> Dee Roth, Jerry Bean, Nancy Lust, and Taian Saveanu, " Homeless in Ohio: A Study of People in Need," (Columbus: Ohio Department of Mental Health, 1985)

<sup>3</sup> Nels Anderson, The Hobo (Chicago, IL.: University of Illinois Press, 1923 )

due to physical disabilities, personality defects, drug addictions, debilitating personal crises and wanderlust.

A decade later, during and perhaps as a consequence of the Great Depression, vulnerability to homelessness came to be seen as, in part, due to human capital deficits.<sup>4</sup> As the United States moved out the Depression, writers continued to emphasize the importance of deficient education and training in vulnerability to homelessness.<sup>5</sup> The examination of the significance of human capital deficiencies on homeless domiciled transitions is based on four indicators, two dealing with training including occupational skill training, educational attainment and two referring to employment that encompassed overall work histories and recent employment experiences.<sup>6</sup> It had been thought that the rate of exiting homeless spells is lower and the rate of returning to homelessness greater among individuals who have less education, have no vocational training, have spent the greater part of their adult lives unemployed and who have not had any work experience in the past 30 days.<sup>7</sup>

### **Prevalence**

Trying to conduct an accurate count of the homeless is a difficult task but despite the difficulty, an accurate count is necessary for policy-makers need to know how many homeless people there are or whether or not the total is rising.

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<sup>4</sup> Ibid.

<sup>5</sup> Ibid.

<sup>6</sup> Ibid.

<sup>7</sup> Ibid.

Even providers of emergency food and shelter need an accurate homeless count before they can devise ways to meet their needs. Since homelessness emerged in the 1980's experts have been unable to agree on of services to the homeless cannot agree on the exact number of homeless people there are in the United States.<sup>8</sup>

The 1995 Annual report of the National Alliance to End Homelessness, a Washington based advocacy group, touched on some of the pitfalls of enumerating people without a place to live. On any given day, the Alliance estimated some 750,000 Americans will be homeless<sup>9</sup>. It further estimated that between 1.3 million and 2 million persons will experience homelessness over the next year.<sup>10</sup> In summary, no one knows how many homeless people there are in America because of the difficulties in locating and counting them. As a result, there is considerable disagreement over the size of the homeless population. However, there is agreement among shelter providers, researchers and agency officials that the homeless population is growing. Estimates of the annual increases in growth among the homeless vary between 10 and 30 percent.<sup>11</sup>

In 1995, the U.S. Conference of Mayors conducted a study of homelessness in American cities and found that overwhelmingly, families with children comprised more

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<sup>8</sup> National Alliance to End Homelessness. Annual Report. (Washington, D.C. 1995)

<sup>9</sup> Ibid.

<sup>10</sup> Ibid.

<sup>11</sup> James D. Wright. Address Unknown – The Homeless in America. (New York, N.Y.:Aldine de Gruyter. 1989), p.32

than a third of the homeless population in 29 major cities.<sup>12</sup> Following closely behind are single men. In 1995, the U.S. Conference of Mayors estimated that single men comprised 46% of the total homeless population followed by families with children (40%) and then single women (14%).<sup>13</sup>

A study conducted by researchers from the University of Pennsylvania conducted a study of the homeless in New York City and in Philadelphia and found that African Americans were 2.3 times more likely to use a homeless shelter than the population as a whole and 17 times more likely to do so than Whites.<sup>14</sup> Additionally, African Americans were 21 times more likely to be homeless than Whites.<sup>15</sup> To further underscore this point, the Task Force for the Homeless in Atlanta stated that 86% of the callers requesting shelter in 1995 were African American.<sup>16</sup> This study further validated the fact that African American have a greater tendency toward homelessness than any other racial group.

### **Theoretical Perspectives**

Many factors and circumstances lead people to become homeless. Several social problems factor into this equation, primarily the lack of affordable housing, eviction,

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<sup>12</sup> U.S. Conference of Mayors. A Status Report on Hunger and Homelessness in America's Cities in 1995.

<sup>13</sup> Ibid.

<sup>14</sup> Dennis Culhane and Stephen Metraux. "The Black Hole: The Effects of Homelessness on Race" ,32

<sup>15</sup> Ibid.

<sup>16</sup> Task Force for the Homeless / Georgia Coalition to End Homelessness. Annual Report. (Atlanta, Georgia. 1996.)



family break up, relocation and job loss.<sup>17</sup> Many who are homeless are afflicted with individual problems such as illness, disability, mental illness, substance abuse or domestic violence.<sup>18</sup> Government safety nets do not necessarily take care of the homeless population either. In 1996, approximately 61% of the female callers to the Task Force for the Homeless in Atlanta's 24 hour hotline were receiving some sort of government assistance but were unable to keep a roof over their families' heads.<sup>19</sup> Nationally, 20% of Aid to Families with Dependent Children (AFDC) families did not receive any kind of housing subsidy.<sup>20</sup>

In 1996, President Clinton signed into legislation the most sweeping changes in welfare legislation since the 1960's. The legislation set a lifetime limit of five years per family and requires able bodied adults to work after two years. The legislation does not provide any additional living wage employment opportunities for welfare recipients. It is estimated that an additional 2.6 million people will be pushed into poverty as a result of this legislation.<sup>21</sup>

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<sup>17</sup> Ibid.

<sup>18</sup> David E. Pollio. "The Relationship between Transience and Current Life Situation in the Homeless Services-Using Population." Social Work, 42, ( November 1997) 541-551

<sup>19</sup> Task Force for the Homeless / Georgia Coalition to End Homelessness. Annual Report. (Atlanta, Georgia. 1996)

<sup>20</sup> Ibid.

<sup>21</sup> Ibid.

Moving welfare recipients into work has long been a cornerstone of welfare reform proposals. Encouraging recipients to get a job is one of the key features of this legislation. It encourages states to increase their welfare rolls without investing in any serious or effective job program.<sup>22</sup> Furthermore, if states want to continue to receive their full Temporary Aid to Needy Families Grant, states will be required to have 25% of their case load working at least 25 hours per week and at least 50% of the caseload working 20 hours per week by 2002. If effective job training programs are not developed, welfare recipients will not be able to find gainful employment and the states will not meet the mandates outlined in the welfare legislation.

### **Related Research**

With so many American among the ranks of the homeless, solutions to ending the problem have been sought. In 1987, President Reagan signed into legislation the McKinney Act. The measure was introduced to bring an end to a seven week protest at the United States Capitol in Washington, D.C. organized to bring attention to the plight of the homeless. The bill was named for the late House Republican Stewart McKinney who died from complications from AIDS when he contracted pneumonia after sleeping outside during the seven week protest at the Capitol.

The McKinney Act authorized \$443 million in homeless aid for fiscal 1987 and an additional \$616 for fiscal 1988.<sup>23</sup> Among the other provisions, it established an

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<sup>22</sup> Ibid.

<sup>23</sup> Congressional Quarterly Inc. "Can Homelessness be Prevented?" The CQ Researcher, 6., (Washington, D.C. January 26, 1996), 84

interagency council on the Homeless comprised of organizations to coordinate federal programs to assist the homeless and report to Congress and the President on the extent of the nation's homeless problem. The nearly 20 programs covered by the measure included emergency food and shelter, medical and mental health care, permanent housing, education and job training.

The McKinney Act was extended in 1993 to authorize \$150 million to develop and renovate single rooms for the homeless but it did not fund the interagency council which provided the social services that it did in the late 1980's.<sup>24</sup> During the Clinton Administration, funds have been approved to continue efforts to provide shelter, medical attention and job training to solve the problem of homelessness. Additionally, many states provide general assistance in the form of cash payments and food stamps for citizens who can demonstrate distress and a need for such services.<sup>25</sup>

Many community agencies also provide interventions to assist the homeless. For example, the Grady Health System in Atlanta, Georgia provides several services for the homeless population that it serves.<sup>26</sup> Not only are medical services provided but the Social Services Department provides clothing, community resource referrals to local

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<sup>24</sup> Ibid.

<sup>25</sup> Harold C. Schwartz. "On the Edge: Preventing Homelessness". Social Policy. 19. (Winter 1989), 2-4 .

<sup>26</sup> Paul Olander and Monique Spaulding. "Grady Hospital Campus Utilization Study: An Exploratory Study of Demographic and Utilization Characteristics of Persons Inhabiting the Campus of Grady Memorial Hospital." (University of Georgia School of Social Work , 1998) (Unpublished)

shelters, soup kitchens, rehabilitation agencies and church ministries.<sup>27</sup> Also, the Task Force for the Homeless, another community resource based in Atlanta, fulfills needs for emergency shelter, clothing, treatment, transportation and clothing.<sup>28</sup> Additionally, the Atlanta Union Mission, a homeless shelter in Atlanta, provides the homeless with post office boxes so that the homeless have a place to receive mail and a place they can claim as an address.<sup>29</sup>

Additional efforts to prevent homelessness exist in the private sector. In New York City, the Rental Assistance Program, administered by the National Alliance to End Homelessness, provided up to \$200 per month to help people pay their rent.<sup>30</sup> Although primarily geared toward people on the streets and in shelters or coming out of rehabilitation, the privately funded program also covered persons who were living with family and friends.

New York's Chase Manhattan Corporation also offers bank accounts to homeless veterans in the city. In many cases, having a safe place for their money enables the veterans to rent an apartment after a period of homelessness.

The Life Skills Program, operated nationally by the Alliance to End Homelessness, provides daily living skills to those who never learned them.<sup>31</sup> Subjects include setting

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<sup>27</sup> Ibid.

<sup>28</sup> Task Force for the Homeless / Georgia Coalition to End Homelessness. Annual Report. (Atlanta, Georgia. 1996), 1.

<sup>29</sup> Ibid.

<sup>30</sup> Schwartz, "On the Edge: Preventing Homelessness", 2-4 .

<sup>31</sup> Ibid.

goals, budgeting, parenting and being a good tenant. Additionally, The Task Force for the Homeless in Atlanta publishes a list of Drug and Alcohol Treatment Centers in the metropolitan Atlanta area. Many of the agencies listed include some temporary shelter while the client is in rehabilitation. Of the 29 agencies listed to provide services to the homeless, only 2 agencies, CARP (Comprehensive Addiction Rehabilitation Program) and Covenant House, provide job readiness programs.<sup>32</sup>

Finally, a comprehensive program to offer intervention and employment training for the homeless existed in Oregon state.<sup>33</sup> The Homeless Employment and Related Training (HEART) Project provided thirty homeless individuals with an opportunity to learn basic construction skills and find employment in Oregon's home building industry.<sup>34</sup> The thirty individuals participated in a six week training course and were given shelter and medical attention while in the program. At the conclusion of the program, the participants were given an entry level position in construction within the state of Oregon. The goal was to help the participants in the HEART Project transition from homelessness to permanent housing through the use of employment training.

### **Theory on Life Satisfaction**

Homelessness is a state that is contraindicative to life satisfaction. One theory on life satisfaction is rooted in Maslow's Hierarchy of Needs. Maslow views the individual as

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<sup>32</sup> Ibid.

<sup>33</sup> Kathryn W. Goetz, Cynthia Schmiede, "From Marginalized to Mainstream: The HEART Project Empowers the Homeless," Family Relations 45 (October 1996), 375-379

<sup>34</sup> Ibid. p 376

an integrated organized whole.<sup>35</sup> The basic needs of the individual are dynamically related in hierarchical fashion. Maslow introduced the concept of prepotency to explain the relationship between needs. The prepotent need is the need which must be satisfied first. When that need is satisfied, the next order of need emerges and demands to be satisfied. The needs that have been satisfied do not disappear but the prepotent need has the strongest influence over the behavior of the individual.

Maslow puts forth the basic needs in the order of their prepotency: 1) physiological, 2) safety, 3) belonging and love, 4) esteem and 5) self-actualization. Maslow adopted the holistic approach and felt that the individual was influenced by the dynamic changes of these needs. As the individual moves through the hierarchy, a sense of external meaning develops.<sup>36</sup> In explaining the esteem needs, Maslow states that all healthy people have a need for high evaluation of themselves and for the esteem of others. The satisfaction of these needs leads to feelings of worth, adequacy and general satisfaction. Subsequently, life satisfaction can be achieved through feelings of worth and adequacy and feelings of worth and adequacy can come from the satisfaction of working, and taking care of one's need for shelter and food.

### **Theoretical Framework**

The theoretical framework for this study is based on that of Insoo Kim Berg and

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<sup>35</sup> Abraham Maslow, Motivation and Personality, 3rd Ed (New York, N.Y.: Harper & Row, 1987), 19-20

<sup>36</sup> Colin Wilson, New Pathways in Psychology: Maslow and the Post-Freudian Revolution (New York. Taplinger Publishing Company, 1972): 37

Abraham Maslow. Berg advocated Brief Solution Focused Therapy which ignores the pathology of the patient and focuses on the client's solution to his problem. This form of therapy is based on the premise of constructing solutions to problems rather than to dissolve the problem.<sup>37</sup> The therapist encourages the client to define what the problem is, make a realistic, achievable goal to solve the problem and then encourages the client to continue behaviors that are producing successful results and discontinue behaviors that are not working for them. One of the more powerful techniques in this therapy is the use of the "Miracle Question".<sup>38</sup> This technique is a powerful way of helping clients to focus on solutions rather than problems. The therapist will ask the client "Suppose you woke up one day and there was a miracle and your problem was solved how would you know? What would be different?" According to Insoo Kim Berg, clients are frequently able to construct answers to this "Miracle Question" concisely and specifically.<sup>39</sup>

Brief Solution Focused Therapy is totally focused on solutions. Because the therapy is focused on solutions rather than problems, little is said about how the problem arises.<sup>40</sup> The solution to a problem is unrelated to how the problem developed thus a

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<sup>37</sup> Insoo Kim Berg, Family-based Services: A Solution-Focused Approach New York: Norton Publishers. 1994, 9

<sup>38</sup> Brian Cade, William Hudson O'Hanlon, A Brief Guide to Brief Therapy New York: W. W. Norton and Company Publishers, 1993, 101

<sup>39</sup> Ibid.

<sup>40</sup> Ibid.

focus on the future rather than the past is advocated.<sup>41</sup> It is assumed that the client really wants to change.

This therapy has a set of techniques designed to lead the client to solutions.<sup>42</sup>

Various techniques and some representative questions include:

Exception questions - Can you think of a time when you didn't have the problem?

Miracle questions – What would be different if you went to sleep and a miracle happened and solved your problem?

Scaling questions – On a scale from one to ten, how do you feel now compared to when we started this intervention?

Coping questions – Given how bad that was, how were you able to cope?

The formula first interview – After you leave today, observe what happens that you want to continue during the next week.

Giving compliments – Wow, that was very smart of you to think of that!

The therapist then encourages the client to use the same approach when attempting to work toward a solution to their problem. Much of the work for solution focused therapy lies in the negotiation of an achievable goal. Because of the ease and the brevity of Brief Solution Focused Therapy, this therapy model was considered appropriate for use with a homeless male. At various stages of the intervention, the techniques of this therapy were utilized with the client. For example, compliments were always given to the client

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<sup>41</sup> Ibid.

<sup>42</sup> Michael P. Nichols, and Richard C. Schwartz, Family Therapy: Concepts and Methods 4<sup>th</sup> ed. Needham Heights, MA: Allyn and Bacon Publishers, 1998, 391



for his resourcefulness and for answering questions correctly during the modules. The “miracle question” and the “coping question” was utilized at the very beginning of the intervention to determine how he was coping with being homeless and what would be different about his life if he could change it. It was at this time the client responded by expressing a desire to have a job.

By choosing to focus on the client’s solution to his problem (finding employment and having a better life), a theoretical understanding of Maslow’s concepts regarding needs and using Berg’s Solution Focused Therapy, were of paramount importance in creating an intervention with this client. Maslow’s basic needs of safety, esteem and actualization form a theoretical base in the use of Solution Focused Therapy.

### **Hypotheses**

In this study, the researcher sets for the following hypotheses:

Hypothesis 1: There is a significant relationship between learning employability skills and life satisfaction.

Hypothesis 2: There is a significant relationship between learning employability skills and employability.

### **Definition of Terms**

The operational definitions of this study are as follows:

**Life Satisfaction:** The subjective judgment about one's well-being. It describes the extent to which one is happy with their life circumstances and surroundings. Life satisfaction will be measured by scores on the Generalized Contentment Scale (GCS).<sup>43</sup>

**Employability:** The extent of knowledge regarding job search, resume preparation, interviewing techniques and appropriate interview attire from which one is able to secure employment. Employability will be measured by scores on the Job Skills Assessment.

**African American Male:** A person of the male gender who was born in America and is of African descent.

**Homeless:** The state of having no home or permanent place of residence.

**Brief Solution Focused Therapy:** A therapeutic intervention strategy that lasts six to eight sessions and focuses on attaining the client's solution to his immediately identifiable problem causing the most distress.<sup>44</sup>

**Job Skills Training:** The six training modules developed by the researcher to train the client on how to conduct a job search. The goal of the training is to lead to gainful employment.

**Intervention:** What the practitioner does in a planned manner to affect or change a client's target problem.<sup>45</sup> In this study the intervention is the Job Skills Training designed to increase the client's chances of securing employment.

**Interests:** The kinds of activities the client enjoys performing in a job.

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<sup>43</sup> Martin Bloom, Joel Fischer, John G. Orme, Evaluating Practice - Second Edition New York: Allyn and Bacon, 1995, 296

<sup>44</sup> Michael P. Nichols, and Richard C. Schwartz, Family Therapy: Concepts and Methods, 391

<sup>45</sup> Martin Bloom, Joel Fischer, John G. Orme. Evaluating Practice - Second Edition, 298

**Strength:** The client's skills and experience necessary for securing employment.

**Weakness:** The client's lack of skills and experience necessary for securing employment

**Work History:** The types of employment performed by the client in the past.

**Personal Responsibility:** The client's willingness to be accountable for his actions.

**Work Habits:** The customary practice of arriving to work on schedule and satisfactorily performing the assigned tasks.

## **CHAPTER THREE**

### **METHODOLOGY**

#### **Research Design**

A single subject design was used in this study. In notational form, the design can be depicted as:

**A B**

where:

A = Baseline

B = Intervention Phase

For the intervention used in this study, pre and post test single system design will be used. The pre and post – tests for the Job Skills Assessment and the Generalized Contentment Scale will determine the client's level of employability and life satisfaction, respectively. The pre-tests for the Job Skills Assessment and the Generalized Contentment Scale will measure the client's level of employability and life satisfaction, respectively, prior to the intervention while the post – tests will give a reading of employability and life satisfaction after the conclusion of the intervention.

According to Bloom, Fischer and Orme, a single subject design can be strong in internal validity.<sup>1</sup> The logic of single subject designs requires taking enough repeated measures to make it unlikely that extraneous factors (such as fluctuations in the job market, increase in the client's motivation) would account for improvements that take place in the target problem upon the onset of the job training. This logic also tends to rely on comparing trends that are identified in the repeated measures to control for factors like maturation or statistical regression.<sup>2</sup> However, it is important to remember that based on this logic, the internal validity of single subject designs is enhanced when the baseline period has enough measurement points to show a stable trend in the target problem and enough points to establish the unlikelihood that extraneous events affecting the target population will coincide only with the onset of intervention.

In this study, the extraneous effects taken into consideration were prior knowledge of the subject matter and interest in the subject matter. Furthermore, AB designs can be replicated and if the results of various AB studies on the same intervention are consistent, the evidence about the effectiveness of the intervention is strengthened, AB designs are also useful because they provide immediate feedback that enables practitioners to monitor variations in the target problem, explore alternative explanations of changes with the client and modify service delivery if necessary for the case with Mr. Moore.

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<sup>1</sup> Martin Bloom, Joel Fischer, John G. Orme, Evaluating Practice - Second Edition, 297

<sup>2</sup> Ibid.

conclusion of the two week period, it was expected that the client will go out and apply for at least three (3) jobs. Also, since the client will be a homeless male, a meal, guaranteed shelter placement and transportation to the shelter will be provided by the researcher as an incentive to him for participating in the study. At the conclusion of the Job Training Modules, the client will be given clothing appropriate for interviewing for a job.

Two measurement instruments were used in this study to measure the client's life satisfaction. The first tool is the Job Skills Assessment (Appendix A). This assessment was developed by the researcher and is designed to provide participants the opportunity to integrate materials learned in the Job Training Modules and apply them to practical situations. The Job Training Modules facilitated the acquisition of new knowledge and skills to increase competencies in obtaining employment. This was the first time that this assessment tool was used. It had not been previously used on any client. At the completion of these Modules, clients will be able to define and operationalize major terms used by the instructor of the modules. The purpose of this Pre - Test / Post-Test is to gather baseline information indicating the knowledge and skill level of clients prior to and after participating the in Job Training Modules.

### **The Setting**

Over a two week period, the researcher met with the client, Mr. Moore,(a fictitious name) in a conference room in the Grady Health System Emergency Care Center. Grady Health System is a large public hospital located in downtown Atlanta,

### **The Setting**

Over a two week period, the researcher met with the client, Mr. Moore, (a fictitious name) in a conference room in the Grady Health System Emergency Care Center. Grady Health System is a large public hospital located in downtown Atlanta, Georgia. The Health System was created and funded in part by the Fulton – DeKalb Hospital Authority which uses tax dollars from the residents of Fulton and DeKalb counties (Georgia) to provide care for the indigent citizens of those counties. Consequently, the hospital serves a large percentage of homeless clients.<sup>3</sup> The client was given a set time of 11:30 p.m. to report to the hospital for each session.

During the first module, which was called “Before Looking for a Job”, the client was asked to complete the Job Skills Assessment to gather baseline data on the client’s knowledge about how to find a job. At the beginning of each module, the client was asked to complete the Generalized Contentment Scale to gauge his life satisfaction. During the last module, the client repeated the Job Skills Assessment to determine if there was a change in score since the introduction of the intervention.

Permission was granted to the researcher to conduct this single subject intervention for a practice based thesis by James G. Hammons, LCSW, Medical Social Worker in the Social Services Department at the Grady Health System. The letter of permission is on file with the Clark Atlanta University School of Social Work.

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<sup>3</sup> Paul Olander, and Monique Spaulding, “Grady Hospital Campus Utilization Study: An Exploratory Study of Demographic and Utilization Characteristics of Persons Inhabiting the Campus of Grady Memorial Hospital.”, 9

### **Data Collection Procedure / Instrumentation**

At the beginning of the intervention, the client was asked sign and informed consent to participate in the study (Appendix A). On the first day of the intervention period, the WALMYR General Contentment Scale (GCS)<sup>4</sup> (Appendix B) and the Job Skills Assessment (Appendix C) was given to establish a baseline. The client was given all necessary information concerning dates, times and locations to meet the researcher. The client was instructed to meet with the researcher at the Grady Health System – Emergency Care Center at 11:00 p.m. on the scheduled nights for meeting. Throughout the intervention, the importance of personal responsibility was stressed. The data for each of the assessment tools used in the intervention were completed by the client during the sessions.

The Job Skills Assessment consisted of 18 questions that were developed by the researcher and were directly adapted from the curriculum taught in the six Job Training Modules. The questionnaire was subdivided into six sections with each section focusing on specific questions from the Job Training Modules. The questions in the Assessment were a combination of multiple choice questions, True/False questions and fill in the blank questions. The researcher developed a scoring scale that consisted of four categories. These categories were as follows: (1) 1-4, Poor, (2) 5-9, Fair, (3) 10-14, Good, (4) 15-18, Excellent. The difference in the distribution of the intervals is based on an eighteen item questionnaire with four categories. The composite scores were placed in one of the

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<sup>4</sup> Bloom, Fischer, and Orme, Evaluating Practice - Second Edition, 194-196.



The pre and post test to measure life satisfaction administered was the WALMYR Generalized Contentment Scale (GCS) developed by Walter W. Hudson, 1992. The GCS will also be administered throughout the intervention period to measure the client's general satisfaction with his life before, during and after the introduction of the intervention. This questionnaire was chosen because it was developed specifically for single system evaluation to monitor and evaluate the magnitude (extent, degree, intensity) of the clients general contentment through periodic administrations of the questionnaire. The GCS scale is short (25 questions), is easy to administer, interpret and score.<sup>5</sup> The WALMYR Scales also have consistency reliabilities of .90 which is high. Similarly, for the questions which test-retest reliability has been examined, these reliabilities have been high.<sup>6</sup> With the WALMYR scales, the higher the score on the test indicates the greater the tendency for the variable to exist. In this case a high score on the GCS, indicates a higher level of general contentment or satisfaction with life.

By analyzing the occurrence of factors such as unemployment and by using the Generalized Contentment Scale (GCS) and the Job Skills Assessment to help evaluate the factors, a better understanding of employability and life satisfaction is sought. A clearer understanding of how Job Training Skills will affect the possibility of employment and life satisfaction will lead to improved intervention techniques with this population.

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<sup>5</sup> Ibid.

<sup>6</sup> Ibid.

### **Data Analysis**

For the purpose of this study, the “Statistical Package for Social Science (SPSS) for Windows ’95 was utilized. Comparative analysis and percentages were used to analyze the data.

### **The Intervention**

#### **Case History**

Danny Moore\* (a fictitious name) is a 33 year old African American male who, on two occasions had presented to Grady Health System’s Emergency Care Clinic for several minor ailments. Mr. Moore has reported that he was homeless and had been for approximately one month. Mr. Moore has accessed many resources for the homeless population in the Atlanta area but increasingly insisted that he did not wish to stay in his current homeless situation. He has mentioned on numerous occasions that his life would be so much better if he only had a job.

In obtaining a social history for assessment purposes, it was found that Mr. Moore was born in a northeastern state and is the middle child of two brothers. His mother was currently residing in the northeastern state and his father is deceased from an alcohol related illness. He claims that relations were somewhat strained with his middle class family and described the other members as being “dysfunctional”. At the time of the social history study, Mr. Moore indicated that he was currently married to a woman who lived in a southern state but was currently separated from her and their 2 year old son. Mr. Moore

had two other children, ages 5 and 8, from a previous marriage and one other child, age 10, from yet another relationship.

Mr. Moore completed high school in a northeastern state as well as three years of college at a university in another southern state. He was also a veteran and had held jobs in the field of banking, insurance, sales, landscaping and customer service.

Mr. Moore reported no previous history of mental illness or mental retardation. He admitted to a history of alcohol, cocaine and marijuana abuse for which he had been in treatment. He admitted no relevant health problems but during discussion reported a family history of hypertension, kidney failure and substance abuse.

According to Mr. Moore, his significant life crises included substance abuse, divorce, separation from his second wife and children as well as his homeless state. Mr. Moore reported that his life would be better and he would be more satisfied if he were employed. He mentioned on several occasions that he felt "disconnected" from social contacts. He was concerned with his basic needs of food and shelter. Living the life of a homeless man had affected his personal safety and security regarding physical and emotional harm and had impacted his social life.

Mr. Moore had applied for several jobs for which he should have qualified but encountered some problems obtaining the jobs. He believed that he needed a resume that adequately represented his vast employment skills but does not make him appear to have an unstable work history. His work history does not represent any continuity from one job to the next. His periods of employment have been erratic. He expressed fear of the employers conducting a background check and felt that he needed help in improving his

knowledge and skills to facilitate a successful job search. The researcher's assessment of Mr. Moore indicated that he had several problems that should be dealt with. He had a history of substance abuse and had currently been homeless for one month. In that time period, he had been able to successfully connect with social service agencies in the downtown area in order to have a place to sleep, shower and eat. He was working in a labor pool performing occasional day labor. He reported experiencing some mild depression and had been drinking to combat the feelings of depression. The first goal for Mr. Moore to accomplish was to find stable employment and move into his own residence. Once he was in a more stable environment, he could begin to deal with his substance abuse problems and reconnecting with his children, wife and family.

In creating an intervention with Mr. Moore, the researcher relied on experience with some aspects Crisis Intervention and Brief Solution Focused Therapy. In the essence of time and the necessity of his basic needs being taken care of, the researcher used Brief Solution Focused Therapy. Brief Solution Focused Therapy views change as inevitable and constantly occurring. Brief Solution Focused Therapists believe that it is easier to construct solutions rather than to dissolve problems.<sup>7</sup> Brief Solution Focused Therapy ignores the pathology of the patient and focuses on the client's solution (client's goals) to his problem<sup>8</sup>. The intervention period is brief – usually six to twelve sessions and is primarily structured around what the clients says the problem is. Brief Solution Focused

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<sup>7</sup> Ibid.

<sup>8</sup> Insoo Kim Berg, Family-based Services: A Solution-Focused Approach New York: Norton Publishers, 1994

Therapy is totally focused on solutions and techniques from the therapy were utilized throughout the modules.<sup>9</sup>

Mr. Moore consistently stated that he would feel better about his life if he had a job. He felt that having a better job would help him to “get a roof over his head and food to eat”. He would not have to worry about other homeless people stealing from him or threatening his safety. He mentioned that he was depressed about the fact that he has no social contacts, primarily with women. He states that he would feel better if he had a place to bring a young lady to or be able to take her out to dinner. In essence, Mr. Moore felt that the ultimate solution to his problem of homelessness would be to become gainfully employed.

Maslow's great insight was to place actualization into a hierarchy of motivation and he developed a pyramid of human needs commonly known as “Maslow’s Hierarchy of Needs”<sup>10</sup>. Self actualization, as he called it, is the highest drive, but before a person can turn to it, he or she must satisfy other, lower motivations like hunger, safety and belonging.<sup>11</sup>

The hierarchy has five levels which include Physiological (hunger, thirst, shelter, sex, etc.), Safety (security, protection from physical and emotional harm), Social (affection, belonging, acceptance, friendship), Esteem (also called ego). The internal ones

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<sup>9</sup> Ibid.

<sup>10</sup> Abraham Maslow, Motivation and Personality, 3rd Ed New York: Harper & Row, 1987

<sup>11</sup> Ibid.

are self respect, autonomy, achievement and the external ones are status, recognition, attention and Self actualization (doing things).

Maslow points out that the hierarchy is dynamic; the dominant need is always shifting.<sup>12</sup> Mr. Moore's primary needs for shelter and food were not being met and since he insists that being employed would meet these needs and ultimately increase his satisfaction with life, the researcher developed the following intervention to assist Mr. Moore with moving from homelessness into employment and ultimately improving how he feels about his life.

The intervention consisted of six (6) Job Training Modules designed to enhance the client's chances of securing employment. The effectiveness of the modules was measured by a tool developed by the researcher called the Job Skills Assessment. The intent of the Job Training Modules was to teach the client how to successfully integrate his knowledge of own aptitudes, interests, strengths and weaknesses and work experiences coupled with information on how to present and "sell" himself and to finally translate this information into gainful employment. The Job Training Modules were developed by the researcher and was adapted from The Word of Work<sup>13</sup>, The Smith College Job Guide<sup>14</sup> and The Complete Job Search Handbook.<sup>15</sup> This intervention was pre-tested and post-

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<sup>12</sup> Ibid.

<sup>13</sup> Rhoda McFarland, The World of Work New York: The Rosen Publishing Group, 1993

<sup>14</sup> Elizabeth Tener, The Smith College Job Guide - How to Find and Manage Your First Job New York: Penguin Books USA, 1991

<sup>15</sup> Howard Figler, The Complete Job Search Handbook New York: Henry Holt and Company, 1979

tested using the Job Skills Assessment to determine the client's knowledge of job skills.

Each module was completed in one session for a total of six (6) sessions/meetings with the client. The following is a description of the Six Job Training Modules.

### **Module One: Before Looking for a Job**

The purpose of this module focused on assessing the client's aptitudes, interests, strengths and weaknesses. The module also included an assessment of the client's educational attainment and job experiences. At the beginning of the session, a technique from Brief Solution Focused Therapy was used. The researcher asked the client "The Miracle Question" of what would be better about if he could change his past work history. The client answered by stating that he would have gotten jobs that he liked and stayed on the jobs consistently. Since the client's past could not be changed, the researcher instructed him to focus on how this module would help him to achieve that goal for the future by identifying those areas where he would find employment that he enjoyed.

The session included an exercise related to the assessment which allowed the client to verbalize and visualize. These work experiences were categorized into areas where similar work skills were grouped together to show linkage among work experiences in similar industries rather than having them categorized chronologically. This was done in an effort to focus on the client's experiences and not draw so much attention to the gaps in employment. The client's work experiences as a bank teller, customer service clerk, retail associate and truck driver were then categorized into broader titles such as banking, customer service, sales, data entry, and transportation. The client had been employed as a

bank teller for 2 years, as a customer service clerk for 3 years, a truck driver for 6 months and as a sales associate for 11 months. There were gaps in the client's work history where he reported periods of unemployment.

The client then listed his greatest aptitudes, weaknesses, likes and dislikes in jobs that he's had or one's that he ideally would have liked to obtain. Once completed, the client and the researcher synthesized the information obtained into one list for the client's review. From this exercise, the client should have had an accurate assessment of the type of work that he liked to perform, the type of work he has experience and skill to perform as well as a sense of what he is best suited to do. The client and the researcher compiled a list of the aforementioned categories. Mr. Moore listed his aptitudes as: networking, articulate, communication skills, hard working, creative, resourceful, personable. Mr. Moore's likes included: organization, professional office environment, working with the public and creative environment. Mr. Moore's dislikes included: working with numbers, commissioned sales positions, fast food work, labor pool jobs. At the end of the exercise, the client was able to keep a handwritten copy of the information compiled.

### Module Two: Preparing for a Job

The purpose of this module focused on the job application, how to complete a job application, how to prepare a resume and cover letter. The module will began with the client filling out a sample employment application. The researcher assessed the application for accuracy and completion. The client and the researcher will then peruse the application to correct mistakes and to fill in information gaps.



The remainder of the module was spent reading Chapter 1 of The Resume Reference Book by Howard Lauther<sup>16</sup> on the proper format and structure of a resume and cover letter. The book was provided to the client by the researcher. This chapter focused on the structure and the components of the resume, and gave ideas on how to organize work history and education to present the most favorable impression of the applicant to the prospective employer. The researcher assisted the client with preparing a resume. This was necessary in order for the client to apply for the position he sought with a telemarketing agency.

At the conclusion of this module, the client used the "Scaling Question" technique from Brief Solution Focused Therapy by asking the client how he felt, on a scale of one to ten, about what he read in the resume book and how knowledgeable he felt about using what he read to prepare his resume. The client responded that he felt about "ten" on a scale of ten and felt that he could use the resume information to his advantage.

### Module Three: Interviewing Techniques

This module focused on interviewing skills. The importance of speaking clearly, maintaining posture and eye-contact was explained and role-played with the client. The client was instructed to come to this module prepared as if it were an interview with a potential employer. The client was critiqued on appearance (was the client's clothes neat and clean), speech (did the client speak clearly, loudly and use proper grammar and

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<sup>16</sup> Howard Lauther, The Resume Reference Book Jefferson, North Carolina: McFarland and company Inc., 1990

enunciation), posture, non-verbal communication and eye contact. Immediately following the discussion, the client and the researcher repeated the role play activity incorporating the suggestions given from the first role play.

These techniques will be important as the client begins the process of applying for the position he sought with a telemarketing agency. At the conclusion of this module, the client used the "Scaling Question" technique from Brief Solution Focused Therapy by asking the client how he felt, on a scale of one to ten, about what was discussed in the module and how confident he felt about using the module techniques in an actual interview. The client responded that he felt about "ten" on a scale of ten and confident that he could use the techniques during the interview. Also, the "Complimenting Technique" from Brief Solution Focused Therapy was utilized when the client answered questions correctly.

#### Module Four: Dressing for the Interview

This module focused on "dress for success" techniques. The techniques included discussions on the importance of appearance and how appearance is usually the first impression made on a prospective employer. The discussion led to the kind of attire that is appropriate for different kinds of employment. For example, a job in construction would not require that the applicant wear a suit and tie to the interview. In this instance, a pair of slacks and a conservative shirt would be appropriate. For a position in banking, a suit and tie would be required for the interview. The researcher and the client engaged in constructive dialogue around appropriate dress for different kind of job interviews with

suit and tie would be required for the interview. The researcher and the client engaged in constructive dialogue around appropriate dress for different kind of job interviews with the client asking questions for clarity. The researcher provided photographs of people in various modes of attire. The client was asked to evaluate if the person in the picture's appearance is appropriate for a job interview. The client's reaction revealed surprise when he thought some of the attire in the photographs were not appropriate for a work environment when he thought they were. The remainder of the module was dedicated to the importance of appearance and what clothing is expected to be worn during a job interview.

The "Complimenting technique" from Brief Solution Focused Therapy was utilized when the client answered questions correctly.

#### Module Five: Applying for the Job

This module focused on how to search for a job. The use of classified ads, temporary agencies and other resources was explored. The researcher brought a copy of the classified ads from the local paper and instructed the client on how to peruse the ads for jobs that he is either interested in or has skills and experience for. The researcher assisted the client in preparing a resume and a cover letter. The module further focused on how to respond to an ad requesting a resume and cover letter. The researcher instructed the client on how to tailor the cover letter to fit the advertisement of employment. Finally, the researcher gave information about how to find temporary

During this module, the "Complimenting Technique" was also used with the client to give reinforcement for indicating a clear understanding and grasp of the material learned in the module.

### Module Six: Being a Good Employee

The final module focused on what is expected of an employee once a job is secured. This last module in the series focused on the importance of regular attendance, loyalty, following instructions and responsibility on the job. The discussion revolved around the benefits of having a good attitude and how important being willing to work is on the employer's perception of you.

During this module, the "Complimenting Technique" was used with the client to give reinforcement for completing the modules and taking an active approach in working toward a solution to his homeless problems.

Once all modules were completed, it was expected that the client would have the basic skills necessary for seeking employment. Also, the client was expected to apply for two job positions in telemarketing and one customer service which he expressed an interest in. The client was instructed to contact the researcher within 10 days to inform of the status of his employment search. Once employment is secured, it was expected that the client's satisfaction with life would improve.

## **CHAPTER FOUR**

### **PRESENTATION OF RESULTS**

The key hypotheses advanced in this study were:

Hypothesis 1: There is a significant relationship between learning employability skills and life satisfaction.

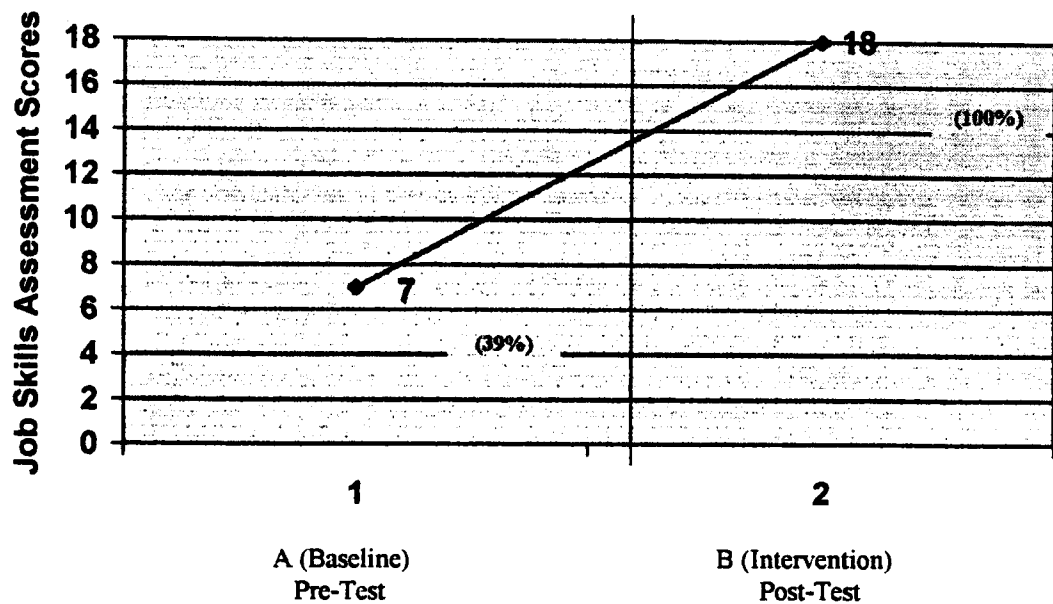
Hypothesis 2: There is a significant relationship between learning employability skills and employability.

The results of the study indicated that teaching job seeking skills had a positive, significant relationship between learning employability skills and employability and life satisfaction.

The results of the study are as follows: On the Job Skills Assessment, the client scored significantly lower on the pre-test than the post-test indicating that the Job Training Modules had increased his knowledge of job training skills. On the pre-test, the client scored 7 points out of 18 (39%) total points indicating a “fair” knowledge of how to conduct a job search. On the post-test, the client scored 18 points out of 18 total points (100%) indicating an “excellent” knowledge of training skills.

The client showed a 61% increase in his knowledge of job training skills between the baseline and intervention periods. A graphic representation of the client's baseline and intervention scores on the Job Skills Assessment is reflected in Figure 1.

**Figure 1**  
**Baseline and Intervention Scores on Job Skills Assessment**  
**(n=1)**



The Generalized Contentment Scale (GCS) was administered to the client six times during the intervention period to gauge his life satisfaction. The client scored 51 points on the pre-test and 80 points on the post-test. With the WALMYR Scales, the higher the score, the greater the magnitude of the problem or item one is attempting to evaluate.<sup>1</sup> Most of the WALMYR scales have a "clinical cutting score" of approximately 30 with the idea being that people who score over 30 have been found to have problems in the area measured and those who score below 30 generally do not.<sup>2</sup> The client's scores showed increase during the intervention period. The client initially scored 51 during the first session. His scores on subsequent administrations of the scale were 54, 52, 58, 60 and 80, respectively. The scores indicated that his life satisfaction improved as he became more knowledgeable about job training skills and thus moved closer to employability.

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<sup>1</sup> Bloom, Fischer, and Orme, Evaluating Practice - Second Edition , 195

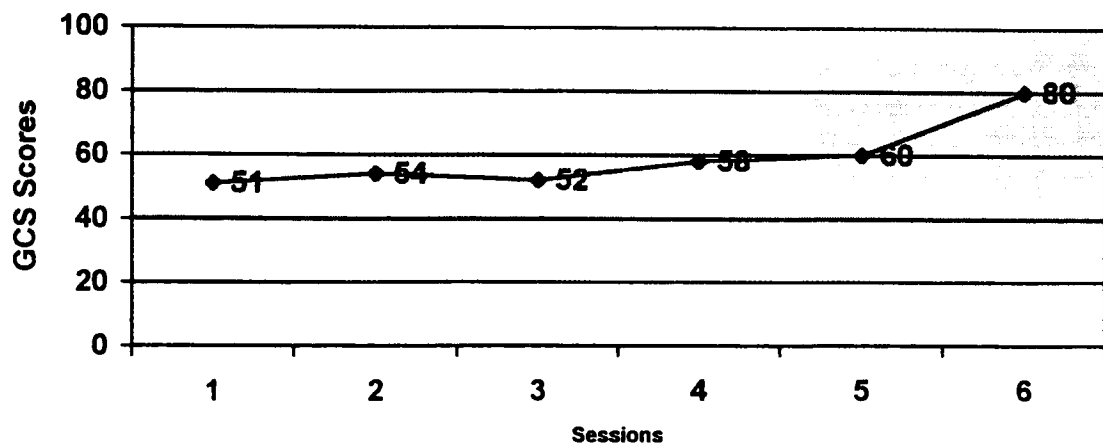
<sup>2</sup> Ibid.

A graphic representation of the client's baseline and intervention scores on the Generalized Contentment Scale is reflected in Figure 2.

**Figure 2**

**Baseline and Intervention Scores on Generalized Contentment Scale  
(n=1)**

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## **CHAPTER FIVE**

### **SUMMARY AND CONCLUSIONS**

This study examined the effects of a Job Training Module on the employability and life satisfaction of a homeless African American male. A significant relationship between teaching Job Training Skills and how it impacts a homeless man's employability and life satisfaction was found in this study. Employability and general contentment or life satisfaction were low prior to the intervention period. As the client progressed through the Job Training Modules, his life satisfaction gradually improved.

At the conclusion of the intervention, the client received a score of 18 on the Job Skills Assessment when it was administered as a post-test compared to a score of 7 when it was administered as a pre-test. This change in score indicates that the client went from having a "fair" knowledge of job training skills to an "excellent" knowledge of job training skills suggesting that the client learned from the content presented in the Job Training Modules.

The client also scored 80 points on the Generalized Contentment Scale (GCS) when it was administered in the first session compared to score of 52 when it was given in the last session. These scores indicate an increase in client's general contentment with his life as the intervention period progressed. The scores further suggested that his life satisfaction improved. Furthermore, the client was able to secure full time employment.

The theoretical framework set forth in this study indicated that meeting one's primary needs was necessary for survival and actualization. Furthermore, Brief Solution Focused Therapy as described by Berg produced a framework for approaching solutions to a client's problems rather than trying to remove the problem. As Berg stated, the client must continue to use solutions that are producing positive results and remove those that are not.<sup>1</sup> The client decided that finding a job would be the solution to his problems and therefore give him a means to meet his basic needs. By continuing to participate in the Job Training Module, the client discovered that he was learning skills necessary to reach his goal of employment. Finally, we discovered that his life satisfaction would improve with the advent of the newly acquired skills and gainful employment.

### **Limitations of the Study**

A limitation of the study was that it could not be generalized to the total population because of its very limited scope. Since there was only one subject to conduct the intervention on, it is not known if the intervention will have similar success in other participants. Another limitation of the study does not take into account other pathologies that may be present among the homeless population such as substance abuse, mental illness or physical handicap which may prevent a homeless person from moving to his current situation to one of employability and subsequently greater life satisfaction.

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<sup>1</sup> Insoo Kim Berg, Family-based Services: A Solution-Focused Approach, New York: Norton Publishers, 1994 , 38

Finally, Brief Solution Focused Therapy did not build in a follow-up plan which might determine the stability of the change over a designated time period.

### **Suggested Direction for Future Research**

Future research in this area would be beneficial to the homeless population and would provide new data that could be utilized toward resource development. Also, as suggested direction for future research may be to administer this intervention on a larger number of individuals to determine if the outcomes would be the same. Finally, the research of homeless people who are mentally ill or who are substance abusers could provide greater insight for the social work profession. The connection between employability and life satisfaction in these groups could be further explored.

## **CHAPTER SIX**

### **IMPLICATIONS FOR SOCIAL WORK PRACTICE**

Although several studies have provided an overview of the homeless population and the barriers that they face in moving from a homeless state to a domiciled state, there has been very limited focus on assisting the homeless through greater employment capability. While the federal government has set forth legislation aimed at ameliorating homelessness, the programs that were implemented were not enough. Most interventions aimed at problems of preventing homelessness have come from the community level. Even here, programs targeting the homeless in the context of their employability skills have been limited.

The hypotheses in this study set forth to show that a correlation exists between acquiring job training skills and employability. Additionally, the study set forth to show that a correlation exists between acquiring job training skills and life satisfaction. An intervention implemented by the researcher in a community service setting, like the Grady Health System, showed that by teaching a homeless African American male how to properly conduct an employment search and arm him with a resume and knowledge of how to conduct himself in an interview would have positive results. Social work practice

could benefit from an intervention aimed at attacking the problem of homelessness from the perspective of offering employability skills. This intervention may offer a more permanent solution.

This research has added knowledge to the social work profession. A greater understanding that life satisfaction may solely be the motivator for homeless men to move toward employability is possible. Social workers serving the homeless population can explore new interventions around preparing the homeless population to become gainfully employed. The role of the Social worker must be to develop an appropriate clinical practice which goes beyond merely assisting the homeless with meeting their basic needs but more so to improve their quality of life to the point where individuals reach a level of self actualization.

Social workers might benefit from continuing to provide advocacy and action on behalf of the homeless. Instead of merely quantifying how many homeless people there are, we need to develop workable solutions to eradicate homelessness.

Using Brief Solution Focused Therapy enabled the researcher to work with the client's goal of employment in a brief, therapeutic manner that may have a positive implication for social work education. Social work educators could use this study to further demonstrate how the creative use of therapy models can be implemented to assist homeless clients. In a larger population, social workers involved in skills training with homeless African American men could use a single subject design incorporating concepts

from crisis intervention<sup>1</sup> accompanied with a solution focused approach to ensure that the techniques outlined in Brief Solution Focused Therapy are consistently used throughout the intervention program, similar to what was done in this research. Finally, the outcomes from this study seemed positive and could be used more widely in interventions with homeless individuals.

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<sup>1</sup> Dean H. Hepworth, Ph.D., and Jo Ann Larsen, D.S.W., Direct Social Work Practice: Theory and Skills Pacific Grove, CA: Brooks/Cole Publishing, 1996, 126

## APPENDIX

**CLARK ATLANTA UNIVERSITY****APPENDIX A****SAMPLE INFORMED CONSENT TO PARTICIPANT**

Dear Participant,

My name is Monique Spaulding and I am a second year MSW student at Clark Atlanta University School of Social Work. I am also an MSW intern at Grady Health System. In pursuit of my graduate degree, I am conducting a research project designed to examine the efficacy of job training skills on employability and life satisfaction. Please assist me by participating in the study. Your time and consideration is greatly appreciated.

Please be assured that your responses and participation in this study will be completely anonymous. At no point will your name be associated with your responses to your completed questionnaires, scales or in the final study. Upon request, results of this study will be made available to you. Please add your signature below to indicate that you are consenting to participate in the study.

Please feel free to contact me through Clark Atlanta University School of Social Work at 404 880-8555.

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Signature of Participant

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Date



**APPENDIX B**  
**Job Skills Assessment Questionnaire**  
**Pre - Test / Post-Test**

This assessment is designed to provide participants the opportunity to integrate materials learned in the Job Training Modules and apply them to practical situations. The Job Training Modules will facilitate the acquisition of new knowledge and skills to increase competencies in obtaining employment. At the completion of these Modules, clients will be able to define and operationalize major terms used by the instructor of the modules.

The purpose of this Pre - Test / Post-Test is to gather baseline information indicating the knowledge and skill level of clients prior to and after participating the in Job Training Modules. Please complete all questions on the sheet provided.

**BEFORE LOOKING FOR A JOB**

1. Before conducting a job search, it is important to know the following about yourself:
  - a) suit size, shirt size and shoe size
  - b) strengths, weaknesses, interests and aptitudes
  - c) the names of three references
  - d) none of the above
2. Knowing your interests and aptitudes for a job will help you to:
  - a) find a job that is suitable for you
  - b) help prevent boredom with a job
  - c) make new friends
  - d) both a and b

**PREPARING FOR A JOB**

3. A cover letter is what a job applicant completes at the employers office when looking for a job.        \_\_\_\_ T \_\_\_\_ F
4. A \_\_\_\_\_ is a formal written presentation of your education and work experience.
5. Classified ads are useful when conducting a job search.        \_\_\_\_ T \_\_\_\_ F

### INTERVIEWING TECHNIQUES

6. Maintaining eye contact is not important during a job interview.  
\_\_\_\_ T \_\_\_\_ F
7. \_\_\_\_\_ is a non-verbal means of using of using your body to convey unconscious thoughts and feelings.
8. One of the most frequently asked questions during an interview is "Tell me about yourself." \_\_\_\_ T \_\_\_\_ F

### DRESSING FOR THE INTERVIEW

9. Proper attire for a job interview consists of a polo shirt and khaki pants.  
\_\_\_\_ T \_\_\_\_ F
10. Employers are more eager to hire a casually dressed person than one in professional attire. \_\_\_\_ T \_\_\_\_ F
11. Wearing a \_\_\_\_\_ suit is preferred when on an important interview.
- a) green
  - b) casual
  - c) navy blue
  - d) none of the above
12. It is considered "professional" when one wears brightly colored suits on a job interview. \_\_\_\_ T \_\_\_\_ F

### APPLYING FOR THE JOB

13. A good way to look for a job is through "word of mouth". \_\_\_\_ T \_\_\_\_ F
14. References are not important on a job application. \_\_\_\_ T \_\_\_\_ F
15. Temporary agencies are used to fill \_\_\_\_\_ job positions.
- a) permanent
  - b) long term
  - c) temporary
  - d) fast food
  - e) none of the above

**BEING A GOOD EMPLOYEE**

16. Being \_\_\_\_\_ adds to one's value as an employee.

- a) lazy
- b) late
- c) responsible
- d) argumentative
- e) none of the above

17. When you are \_\_\_\_\_ from work, your work will either have to be performed by another person or go undone until you return.

18. Characteristics of having a good attitude include:

- a) being flexible and willing to change
- b) not making excuses or complaining
- c) taking responsibility for your mistakes
- d) having respect for others
- e) all of the above

**APPENDIX C**  
**Generalized Contentment Scale (GCS)**

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

This questionnaire is designed to measure the way you feel about your life and surroundings. It is not a test, so there are now right or wrong answers. Answer each item as carefully and as accurately as you can by placing a number beside each one as follows:

- 1 = None of the time
- 2 = Very rarely
- 3 = A little of the time
- 4 = Some of the time
- 5 = A good part of the time
- 6 = Most of the time
- 7 = All of the time

- 
1. \_\_\_\_ I feel powerless to do anything about my life.
  2. \_\_\_\_ I feel blue.
  3. \_\_\_\_ I think about ending my life.
  4. \_\_\_\_ I have crying spells.
  5. \_\_\_\_ It is easy for me to enjoy myself.
  6. \_\_\_\_ I have a hard time getting started on things I need to do.
  7. \_\_\_\_ I get very depressed.
  8. \_\_\_\_ I feel there is always someone I can depend on when things get tough.
  9. \_\_\_\_ I feel that the future looks bright for me.
  10. \_\_\_\_ I feel downhearted.
  11. \_\_\_\_ I feel that I am needed.
  12. \_\_\_\_ I feel that I am appreciated by others.
  13. \_\_\_\_ I enjoy being active and busy.
  14. \_\_\_\_ I feel that others would be better off without me.
  15. \_\_\_\_ I enjoy being with other people.
  16. \_\_\_\_ I feel that it is easy for me to make decisions.
  17. \_\_\_\_ I feel downtrodden.
  18. \_\_\_\_ I feel terribly lonely.
  19. \_\_\_\_ I get upset easily.
  20. \_\_\_\_ I feel that nobody really cares about me.
  21. \_\_\_\_ I have a full life.
  22. \_\_\_\_ I feel that people really care about me.
  23. \_\_\_\_ I have a great deal of fun.
  24. \_\_\_\_ I feel great in the morning.
  25. \_\_\_\_ I feel that my situation is hopeless.

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